

**UNITED STATES BANKRUPTCY COURT OF GEORGIA
NORTHERN DISTRICT**

CASSANDRA JOHNSON-LANDRY)
DEBTOR) BRC 18-55697 LRC

Filed in U.S. Bankruptcy Court
Atlanta, Georgia
M. Regina Thomas, Clerk

Alice B. Meyers
JUL 18 2023
Deputy Clerk

SUBMISSION: AMENDED OBJECTION TO CLAIM NUMBER 6 MIDLAND FUNDING LLC. (21555879)

CASSANDRA JOHNSON-LANDRY, DEBTOR SUBMITS AMENDED OBJECTION TO CLAIM NUMBER 6, MIDLAND FUNDING (21555879). ADDITIONAL DOCUMENTS WERE SUBMITTED AFTER INITIAL CLAIM WAS FILED. IT APPEARS THE PROOF OF CLAIM FORM USED IS NOT UNIFORM WITH THE REQUIRED FORM FROM THE DOJ TRUSTEE/BANKRUPTCY DIVISION. **(EXHIBIT A).**

THE CORRECT NAME FOR MIDLAND FUNDING LOCATED AT THE MICHIGAN ADDRESS IS
MIDLAND CREDIT MANAGEMENT INC, WHICH IS THE AGENT FOR MIDLAND FUNDING
LLC, WHICH IS LISTED AS THE CREDITOR (EXHIBIT B).

DEBTOR REQUEST CLAIM BE DISALLOWED DUE TO FRAUD ACCOUNT AND REPORTING INFORMATION PERTAINING TO LAST TRANSACTION DATE AND PAYMENT DATE WHICH IS NOT CORRECT AS WELL. REFER TO (**EXHIBIT C**) FOR THE PURPOSE OF VIEWING MULTIPLE SAMS ACCOUNTS WHICH ARE NOT DEBTOR'S ACCOUNTS. ALSO, INFORMATION REGARDING AGENT FOR CREDITOR MUST BE LISTED ON CLAIMS REGISTER CORRECTLY.

16TH OF JULY 2021

CASSANDRA JOHNSON-LANDRY

CASSANDRA JOHNSON-LANDRY, PRO

UNITED STATES BANKRUPTCY COURT OF GEORGIA
NORTHERN DISTRICT
CERTIFICATE OF SERVICE

I, CASSANDRA JOHNSON-LANDRY, DEBTOR CURRENTLY SUBMIT AMENDED
OBJECTION TO CLAIM NUMBER 6 MIDLAND FUNDING LLC, (21555879). DEBTOR IS
OVER THE AGE OF 18 YEARS. AMENDED OBJECTION TO CLAIM #6 SUBMITTED BY
FIRST CLASS USPS MAIL ON 16TH OF JULY 2021.

AMY MARZOUG
MIDLAND CREDIT MANANGEMENT, INC
P.O.BOX 2011
WARREN, MI 48090

HERBERT C. BROADFOOT II
2964 PEACHTREE ROAD, NW.
SUITE 555
ATLANTA, GA 30305

S. GREGORY HAYS
2964 PEACHTREE ROAD, NW.
SUITE 555
ATLANTA, GA 30305

16TH OF JULY 2021

CASSANDRA JOHNSON-LANDRY
CASSANDRA JOHNSON-LANDRY, PRO SE

EXHIBIT A

Fill in this information to identify the case

Debtor 1 CASSANDRA JOHNSON LANDRY

Debtor 2 _____
(Spouse if filing)

United States Bankruptcy Court for the: NORTHERN District of GEORGIA

Case number 18-55697

Official Form 410

Proof of Claim

04-16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Fillers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. § 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>MIDLAND FUNDING LLC</u> Name of the current creditor (the person or entity to be paid for this claim) <u>SYNCHRONY BANK / SAM S CLUB</u> Other names the creditor used with the debtor		
2. Has this claim been acquired from someone else?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, From whom? <u>SYNCHRONY BANK / SAM S CLUB</u>		
3. Where should notices and payments to the creditor be sent?	<u>MIDLAND CREDIT MANAGEMENT, INC. as agent for MIDLAND FUNDING LLC</u> Name <u>PO Box 2011</u> Number Street <u>Warren MI 48090</u> City State Zip Code Contact phone <u>(877) 495-2902</u> Contact email: <u>mbx_ilms_bankruptcy@mcmg.com</u>	Where should payments to the creditor be sent (if Different)	Name Number Street City State Zip Code Contact phone _____ Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (if you use one): -----			
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, Claim number on court claims registry (if known) _____		
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, Who made the earlier filing? _____		

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, Last 4 digits of the debtor's account or any number you use to identify the debtor: XXXXXXXXXXXX-0804
7. How much is the claim?	\$9,000.99
	Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. <u>REVOLVING CREDIT/SERVICES RENDERED</u>
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim</i> Attachment (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other: Describe: _____
	Basis for perfection: _____ Attach redacted copies of document, if any, that show evidence of perfection of a security interest (for example a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded:)
	Value of property \$ _____
	Amount of the claim that is secured: \$ _____
	Amount of the claim that is unsecured \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)
	Amount necessary to cure any default as of the date of the petition: \$ _____
	Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is the claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Check all that apply:	Amount entitled to priority
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).		\$ _____
<input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).		\$ _____
<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).		\$ _____
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(B).		\$ _____
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).		\$ _____
<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies.		\$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment

Part 3: Sign Below

The person completing
this proof of claim must
sign and date it.
FRBP 9011(b).

If you file this claim
electronically, FRBP
5005(a)(2) authorizes courts
to establish local rules
specifying what a signature
is.

A person who files a
fraudulent claim could be
fined up to \$500,000,
imprisoned for up to 5 years,
or both.

18 U.S.C. § 152,157, and
3571.

Check the appropriate box:

I am the creditor.
 I am the creditor's attorney or authorized agent.
 I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
 I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true
and correct.

I declare under penalty of perjury that the foregoing is true and correct.

executed on date 5/21/2018
MM/DD/YYYY

/s/ Amy Marzoug
Signature

Print the name of the person who is completing and signing this claim:

Name Amy Marzoug
First name Amy Middle name Last name

Title Bankruptcy Specialist

Company MIDLAND CREDIT MANAGEMENT, INC.

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address P O Box 2011
Street Address

WARREN MI 48090
City State Zip Code

Contact phone (877) 495-2902 Email mbx_ilms_bankruptcy@mcmcig.com

ACCOUNT(S) SUMMARY

ACCOUNT INFORMATION:

ACCOUNT HOLDER(S) CASSANDRA LANDRY		CURRENT CREDITOR MIDLAND FUNDING LLC		
ORIGINAL CREDITOR NAME SYNCHRONY BANK / SAM S CLUB		ORIGINAL CREDITOR ACCOUNT NO XXXXXXXXXXXX-0804	ASSIGNOR (if other than original creditor)	
TOTAL CLAIM AMOUNT \$9,000.99	UNSECURED PRINCIPAL \$9,000.99	INTEREST DUE \$0.00	FEES \$0.00	COSTS \$0.00
DATE OF LAST TRANSACTION 12/09/2015	CREDITOR AT DATE OF LAST TRANSACTION SYNCHRONY BANK / SAM S CLUB		CHARGE-OFF DATE 07/17/2016	DATE OF LAST PAYMENT 12/09/2015

NOTICE AND PAYMENT INFORMATION:

ADDRESS P.O. BOX 2011 WARREN MI 48090	PHONE/FAX (877) 495-2902 (866) 818-1718	EMAIL MBX_JLMS_Bankruptcy@MCMCG.com	REFERENCE NUMBER 18-136971
---------------------------------------------	-----------------------------------------------	----------------------------------------	-------------------------------

Claim History

Detailed Description of Claim Activity 6-1

Date of Change	Change Made by	Description of Change
05/21/2018	Midland Credit Management, Inc.	Created Amount Claimed: \$9000.99.
<small>Created Filed By: Creditor Created Date Filed: 05/21/2018 Created Description: 6071</small>		

EXHIBIT B



Better Business Bureau®

[Home](#) > [Michigan](#) > [Warren](#) > [Financial Services](#) > Midland Credit Management, Inc

 [Is this Your Business?](#)


Business Profile

Not BBB
Accredited

Midland Credit Management, Inc

PO Box 2121
Warren, MI 48090-2121
<https://www.midlandcredit.com/>
 (866) 300-8750

Contact Information

PO Box 2121
Warren, MI 48090-2121

[Get Directions](#)

<https://www.midlandcredit.com/>

(866) 300-8750

Customer Reviews

2.73/5

All customer reviews are handled by the BBB where the company is headquartered or a central customer review processing location.

Average of 200 Customer Reviews

[Read HQ
Reviews](#)

[Start a
Review](#)

BBB Rating & Accreditation

B

THIS BUSINESS IS NOT BBB
ACCREDITED

Years in Business: 68

This rating reflects BBB's opinion about the entire organization's interactions with its customers, including interactions with local locations.

[View HQ Business Profile](#)

Customer Complaints

217 complaints closed in last 3 years

72 complaints closed in last 12 months

All complaints are handled by the BBB where the company is headquartered or a central customer complaint processing location.

7/16/2021

Business Details Complaints

Complaints

Business Details

Location of This Business

PO Box 2121, Warren, MI 48090-2121

Headquarters

350 Camino de la Reina Ste 100, San Diego, CA 92108-3007

BBB File Opened: 1/13/2017

Years in Business: 68

Business Started: 2/1/1953

Business Incorporated: 5/22/2000

Licensing Information: This business is in an industry that may require professional licensing, bonding or registration. BBB encourages you to check with the appropriate agency to be certain any requirements are currently being met.

Type of Entity: Corporation

Business Management

Mr. Ryan Bell, Executive Vice President and Chief Operating Officer

Contact Information

Customer Contact

Mr. Ryan Bell, Executive Vice President and Chief Operating Officer

Industry Tip

BBB Tip: How to shop for financial services

Read More

Business Categories

Financial Services

Collections Agencies

Consumer Finance Companies

Local BBB

BBB of Detroit & Eastern Michigan

[More Info on Local BBB](#)

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BBB Business Profiles are provided solely to assist you in exercising your own best judgment. BBB asks third parties who submit complaints, reviews and/or responses on this website to affirm that the information provided is accurate. However, BBB does not verify the accuracy of information provided by third parties, and does not guarantee the accuracy of any information in Business Profiles.

When considering complaint information, always take into account the company's size and volume of transactions, and understand that the nature of complaints and a firm's responses to them are often more important than the number of complaints.

BBB Business Profiles generally cover a three-year reporting period. BBB Business Profiles are subject to change at any time. If you choose to do business with this business, please let the business know that you contacted BBB for a BBB Business Profile.

As a matter of policy, BBB does not endorse any product, service or business.

BBB Reports On

BBB reports on known marketplace practices.

[**See What BBB Reports On**](#)

EXHIBIT C

UNITED STATES BANKRUPTCY COURT OF GEORGIA NORTHERN DISTRICT

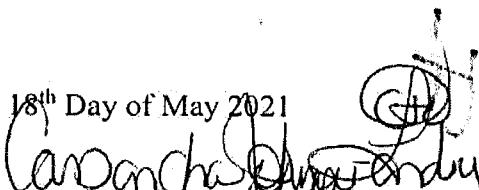
CASSANDRA JOHNSON-LANDRY }
DEBTOR } BRC 18-55697LRC
} }
} }
} }
} }

**OBJECTION TO CLAIM NUMBER Claim Number 6 (21555879) MIDLAND
FUNDING**

CASSANDRA JOHNSON-LANDRY, Debtor, currently objects to the above claim, totaling 9000.99 by Midland Funding (FACTORING COMPANY) on behalf of Synchrony Bank /Sam's. Account was factored out, therefore paying the Creditor. Why was a claim filed within the Debtor's Bankruptcy? In addition, account numbers do not match previous Sam Account. There are two different accounts. There was no refinance by Debtor. Debtor has Identity Theft/Fraud in addition to no validation of Debt.

(EXHIBIT A)

18th Day of May 2021


CASSANDRA JOHNSON-LANDRY, PRO-SE

UNITED STATES BANKRUPTCY COURT OF GEORGIA NORTHERN DISTRICT
CERTIFICATE OF SERVICE

I, CASSANDRA JOHNSON-LANDRY, Debtor currently submit Certificate of Service
Regarding OBJECTION TO CLAIM NUMBER **Claim Number 6 (21555879)**
MIDLAND FUNDING the 18th day of May 2021. Debtor is over the age of 18 years.
COS and Objection will be mailed by the USPS to:

MIDLAND FUNDING
2365 NORTHSIDE DR STE 30
SAN DIEGO, CA 92108

S. GREGORY HAYS, CHAPTER 7 TRUSTEE
2964 PEACHTREE ROAD, SUITE 555
ATLANTA, GEORGIA 30305

HERBERT BROADFOOT, ESQ
2964 PEACHTREE ROAD, SUITE 555
ATLANTA, GEORGIA 30305

18TH DAY OF MAY 2021

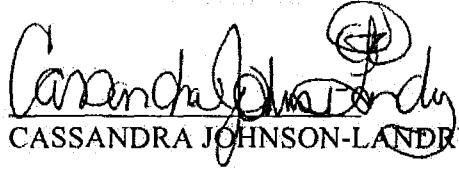

CASSANDRA JOHNSON-LANDRY, PRO SE

EXHIBIT A

10/3/2017

CASSANDRA LANDRY - Experian
Date of Report: Oct 3, 2017

Closed

ACCOUNT DETAILS

MIDLAND FUNDING
857172XXXX

CONTACT INFORMATION

Account Name MIDLAND FUNDING 2365 NORTHSIDE DR STE 30
Account # 857172XXXX SAN DIEGO, CA 92108
(844) 236-1959

Original Creditor SYNCHRONY BANK

Company Sold

PAYMENT HISTORY

Account Type Factoring Company

2017				2016			
Jan	Feb	Mar	Apr	Jan	Feb	Mar	Apr
FP	FP	FP	FP				
May	Jun	Jul	Aug	May	Jun	Jul	Aug
FP	FP	FP	FP				
Sep	Oct	Nov	Dec	Sep	Oct	Nov	Dec
FP							

Date Opened Aug 1, 2016

Account Status Closed

Payment Status Seriously past due date / assigned to attorney, collection agency, or credit grantor's internal collection department

Status Updated Jan 1, 2017

Balance \$9,001

Balance Updated Sep 18, 2017

Original Balance 9001

Monthly Payment

Past Due Amount \$9,001

Highest Balance

Terms 1 Month

Responsibility Individual

Your Statement

Comments

CASSANDRA LANDRY~ Experian
Date of Report: Oct 3, 2017**A**SYNCB/SAMS CLUB DC
521333XXXXXXXXXX

Closed

ACCOUNT DETAILS

Account Name: SYNCB/SAMS CLUB DC
 Account #: 521333XXXXXXXXXX
 Original Creditor: -
 Company Sold: -
 Account Type: Credit Card - Revolving Terms
 Date Opened: Sep 1, 2013
 Account Status: Closed
 Payment Status: Charge-off
 Status Updated: Sep 1, 2016
 Balance: \$0
 Balance Updated: Sep 5, 2016
 Credit Limit: \$7,850
 Monthly Payment: -
 Past Due Amount: -
 Highest Balance: -
 Terms: Revolving
 Responsibility: Individual
 Your Statement: -
 Comments: Transferred to another lender or claim purchased

CREDIT USAGE

0%

No Credit Usage

You have no account balance. Keeping your account balances as low as possible can have a positive impact on your credit.

CONTACT INFORMATIONPO BOX 965005
ORLANDO, FL 32896
(866) 220-0254**PAYMENT HISTORY**

	2016				2015				2014			
	Jan	Feb	Mar	Apr	Jan	Feb	Mar	Apr	Jan	Feb	Mar	Apr
OK	OK	30	60		OK	OK	OK	OK	OK	OK	OK	OK
May	Jun	Jul	Aug		May	Jun	Jul	Aug	May	Jun	Jul	Aug
90	120	120	FP		OK	OK	OK	OK	OK	OK	OK	OK
Sep	Oct	Nov	Dec		Sep	Oct	Nov	Dec	Sep	Oct	Nov	Dec
OK					OK	OK	30	OK	OK	OK	OK	OK

	2013			
	Jan	Feb	Mar	Apr

[Summary](#) [Accounts \(Closed\)](#) [Collections](#) [Inquiries](#) [Public Records](#) [Credit Score](#)

CASSANDRA LANDRY - Experian
Date of Report: Oct 3, 2017



?

SYNCB/SAMS CLUB

771412XXXXXX

Closed

ACCOUNT DETAILS

Account Name: SYNCB/SAMS CLUB
 Account #: 771412XXXXXX
 Original Creditor:
 Company Sold:
 Account Type: Revolving Charge Account
 Date Opened: Nov 1, 2005
 Account Status: Closed
 Payment Status: Account transferred to another office
 Status Updated: Oct 1, 2013
 Balance:
 Balance Updated: Oct 22, 2013
 Credit Limit: \$7,200
 Monthly Payment:
 Past Due Amount:
 Highest Balance: \$2,821
 Terms: Revolving
 Responsibility: Individual
 Your Statement:
 Comments: Account closed due to transfer or refinance.

CREDIT USAGE

N/A

Unknown Credit Usage

Credit usage could not be calculated for this account because either the balance and/or credit limit were not reported.

CONTACT INFORMATION

PO BOX 965005
 ORLANDO, FL 32896
 (800) 964-1917

PAYMENT HISTORY

	2013				2012				2011			
	Jan	Feb	Mar	Apr	Jan	Feb	Mar	Apr	Jan	Feb	Mar	Apr
OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
May	Jun	Jul	Aug		May	Jun	Jul	Aug	May	Jun	Jul	Aug
OK	OK	OK	OK		OK	OK	OK	OK	OK	OK	OK	OK
Sep	Oct	Nov	Dec		Sep	Oct	Nov	Dec	Sep	Oct	Nov	Dec
OK	OK				OK	OK	OK	OK	OK	OK	OK	OK

	2010				2009				2008			
	Jan	Feb	Mar	Apr	Jan	Feb	Mar	Apr	Jan	Feb	Mar	Apr
OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK	OK
May	Jun	Jul	Aug		May	Jun	Jul	Aug	May	Jun	Jul	Aug
OK	OK	OK	OK		OK	OK	OK	OK	OK	OK	OK	OK
Sep	Oct	Nov	Dec		Sep	Oct	Nov	Dec	Sep	Oct	Nov	Dec
OK	OK	OK	OK		OK	OK	OK	OK	OK	OK	OK	OK

	2007				2006			
	Jan	Feb	Mar	Apr	Jan	Feb	Mar	Apr
OK	OK	OK	OK					
OK	OK	OK	OK					
May	Jun	Jul	Aug		May	Jun	Jul	Aug
OK	OK	OK	OK		OK	OK	OK	
Sep	Oct	Nov	Dec		Sep	Oct	Nov	Dec
OK	OK	OK	OK		OK	OK	OK	